

PTO/SB/22 (12-04)
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ersons are required to respond to a collection of information unless if displays a valid OMB control number **Docket Number (Optional)** PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) **FY 2005** G5030.0023/P023 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) **Application Number** 09/749,555-Conf. #5633 Filed December 28, 2000 EXERCISE BODY MONITOR WITH FUNCTIONS TO VERIFY INDIVIDUAL POLICY HOLDER AND WEAR OF THE SAME, AND A BUSINESS MODEL FOR A DISCOUNTED INSURANCE PREMIUM FOR POLICY HOLDER WEARING THE SAME Art Unit Examiner Lena Najarian This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): **Small Entity Fee** Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 120.00 \$225 \$ Two months (37 CFR 1.17(a)(2)) \$450 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$1080 \$ Five months (37 CFR 1.17(a)(5)) \$2160 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to . I have enclosed a duplicate copy of this sheet. Deposit Account Number 04-1073 I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 February 17, 2006 Signature Date (202) 828-2232 Thomas J. D'Amico Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. I hereby certify that this correspondence is being facsimile transmitted to the Pats nt and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. 28,37 ((Thomas J. D'Amico) Signature: